

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

93 SEP -8 PM 7:10  
070 FARMINGTON NM

5. Lease Designation and Serial No.  
NM 12235

6. If Indian, Allottee or Tribe Name  
NM

7. If Unit or CA, Agreement Designation  
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8. Well Name and No.  
GALLEGOS FED26-13-3 #2

9. API Well No.  
30-045-28832

10. Field and Pool, or Exploratory Area  
Basin Fruitland Coal

11. County or Parish, State  
San Juan, NM

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
MARALEX RESOURCES, INC.

3. Address and Telephone No.  
PO BOX 421, BLANCO, NM 87412-0421 (505) 325-5599

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
790' FSL, 790' FWL Sec 3, T26N-13W M

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Stimulation/Tbg Setting
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Stimulation:

Depth Interval: 1356'-1374'

Amount and Kind of Material Used: 27,729 gal 1% KCL  
1,185,200 SCF N2  
7000# 100 mesh  
123,320# 20/40 sd

Tubing Setting:

Size: 2-3/8" , 4.7#, J-55

Depth Set: 1395'

14. I hereby certify that the foregoing is true and correct

Signed Marcia McCracken  
(This space for Federal or State office use)

Title Production Technician

ACCEPTED FOR RECORD  
Date Sept 17, 1993

SEP 00 1993

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

FARMINGTON DISTRICT OFFICE

by 25